16023714

### 510(k) SUMMARY

FEB 0 3 ZU03

Submitter:

Alliance Medical Corporation

10232 South 51<sup>st</sup> Street Phoenix, Arizona 85044

Contact:

Don Selvev

Vice President, Regulatory Affairs & Quality Assurance

(480) 763-5300 (o) (480) 763-5310 (f)

Date of preparation:

August 29, 2002

Name of device:

Trade/Proprietary Name: Reprocessed External Fixation

Devices

Common or Usual Name: External Fixation Devices, Fixation

Appliance, Single/Multiple Component

Classification Name: Single/Multiple Component Metallic Bone Fixation Appliances and Accessories and Smooth or Threaded

Metallic Bone Fixation Fastener

Predicate device(s):

Legally marketed external fixation devices under various 510(k)

premarket notifications.

K802814 Orthofix® Axial External Fixation System

K831576 Orthofix®

**K944092** Additional Accessories for the Orthofix® System

K955848 Orthofix® Modulsystem

**Device description:** 

External fixation devices are specially designed frames, clamps, rods, rod-to-rod couplings, pins, posts, fasteners, wire fixations, fixation bolts, washers, nuts, hinges, sockets, connecting bars and screws used for the management of bone fractures and reconstructive, as well as corrective, orthopedic surgery. Materials used include metal alloys, plastic and composites. These materials are chosen to address a wide range of fractures and applications as well as to allow for the appropriate

fractures and applications as well as to allow for the appropriate

amount of rigidity and stability.

Intended use: External Fixation Devices are intended to be used for the

fixation of supracondylar, or condylar fractures of the femur; for fusion of a joint; for surgical procedures that involve cutting the bone, for fixation of bone fractures; bone reconstruction; as a guide pin for insertion of other implants; or may be implanted through the skin so that a pulling force or traction may be applied to the skeletal system; and others may be used for fixation of bone fractures, for bone reconstructions, as a guide

pin for insertion of other implants, or it may be implanted through the skin so that a pulling force (traction) may be applied to the skeletal system.

## Indications statement:

Reprocessed external fixation devices are indicated for use in patients requiring external skeletal fixation and treatment of fractures, osteotomy, arthrodesis, correction of deformities, fracture revision, bone reconstruction procedures, limb lengthening, correction of bony or soft tissue deformities and segmental bony or soft tissue defects.

# Technological characteristics:

The design, materials, and intended use of the Reprocessed External Fixation Devices are identical to the predicate devices. The mechanism of action of the Reprocessed External Fixation Device is identical to the predicate devices in that the same standard mechanical design, materials, shapes and sizes are utilized. There are no changes to the claims, intended use, clinical applications, patient population, performance specifications, or method of operation.

#### Performance data:

Bench and laboratory testing was conducted to demonstrate performance (safety and effectiveness) of the Reprocessed External Fixation Devices.

- Validation of reprocessing
- Function Testing

Performance testing demonstrates that Reprocessed External Fixation Devices perform as originally intended.

### Conclusion:

Alliance Medical Corporation concludes that the modified device (the Reprocessed External Fixation Device) is safe, effective and substantially equivalent to the predicate devices, as described herein.

#### **DEPARTMENT OF HEALTH & HUMAN SERVICES**





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Don Selvey
Vice President Regulatory Affairs and Quality Assurance
Alliance Medical Corporation
10232 South 51<sup>st</sup> Street
Phoenix, Arizona 85044

FEB 0 3 2003

Re: K023714

Trade Name: Reprocessed External Fixation Devices

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation appliances and

accessories

Regulatory Class: II

Product Code: KTT, KTW, JEC Dated: November 1, 2002 Received: November 5, 2002

Dear Mr. Selvey:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4659. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,
Male Melherm

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

## II. Indications for Use Statement

510(k) Number (if known): KO23714

<b>Device Name</b> : Devices	Alliance Medical C	Corporation Reproc	essed External Fixation
use in patients osteotomy, arth reconstruction p	requiring external s prodesis, correction	keletal fixation and of deformities, fracting thening, corrections.	devices are indicated for I treatment of fractures, cture revision, bone on of bony or soft tissue s.
Concurrence of CE	DRH, Office of Device E	ivaluation (ODF)	
(Divising and N	sion Sign-Off) ion of General, Rest	Mulkisson	
Prescription Use	09)	or	Over-the-Counter Use